DO NOT file this claim if you are going to file a Missouri income tax return! See the instructions. **AMENDED CLAIM** 2008 FORM MO-PTC MISSOURI DEPARTMENT OF REVENUE VENDOR 002 PROPERTY TAX CREDIT CLAIM CODE SOCIAL SECURITY NO SPOUSE'S SOCIAL SECURITY NO LAST NAME FIRST NAME INITIAL JR, SR BIRTHDATE TELEPHONE NUMBER DECEASED MM 2008 JR, SR SPOUSE'S LAST NAME FIRST NAME INITIAL DECEASED IN CARE OF NAME (ATTORNEY, EXECUTOR, PERSONAL REPRESENTATIVE, ETC.) BIRTHDATE PRESENT HOME ADDRESS CITY, TOWN, OR POST OFFICE ZIP CODE You must check a qualification to be eligible for a credit. Check only one. Required copies of letters, forms, etc., must be included with claim. C. 100% Disabled (Attach a copy of the letter from Social Security A. 65 years of age or older (Attach a copy of Form SSA-1099.) Administration or Form SSA-1099.) B. 100% Disabled Veteran as a result of military service (Attach a copy of the letter from Department of Veterans Affairs.) D. 60 years of age or older and received surviving spouse benefits (Attach a copy of Form SSA-1099.) If married filing combined, **FILING STATUS** Single you must report both incomes. Failure to provide the attachments listed below (rent receipt(s), tax receipt(s), 1099(s), W-2(s), etc.) will result in denial or delay of your claim! 1. Enter the amount of social security benefits received by you and/or your minor children before any deductions and/or the 00 amount of social security equivalent railroad retirement benefits. Attach Form SSA-1099 and/or RRB-1099. . . . . . 2. Enter the total amount of wages, pensions, annuities, dividends, interest income, rental income, or other income. 00 Attach Forms W-2(s), 1099(s), 1099-R(s), 1099-DIV, 1099-INT, 1099-MISC, etc. 3. Enter the amount of railroad retirement benefits (not included in Line 1) before any deductions. Attach Form RRB/1099-R (Tier II). 3 00 4 00 **HOUSEHOLD INCOME** 5. Enter the total amount received by you and/or your minor children from: public assistance, SSI, child support, Temporary Assistance payments (TA and/or TANF). Attach a copy of Form SSA-1099(s), a letter from the Social Security Administration and/or Social Services that includes the total amount of assistance received and Employment 00 5 6 00 7. Mark the box that applies and enter the appropriate amount. ☐ a. Enter \$0 if filing status is Single or Married Living Separate; If married and filing combined; □ b. Enter \$2,000 if you rented or did not own your home for the entire year; ☐ c. Enter \$4,000 if you owned and occupied your home for the entire year; ...... 7 00 8. Net household income — Subtract Line 7 from Line 6 and enter the amount; mark the box that applies. a. If you rented or did not own and occupy your home for the entire year, Line 8 cannot exceed \$27,500. If the total is greater than \$27,500, STOP - no credit is allowed. Do not file this claim. □ b. If you owned and occupied your home for the entire year, Line 8 cannot exceed \$30,000. If the total is greater than \$30,000, STOP - no credit is allowed. Do not file this claim. . . . . . . 00 9. If you owned your home, enter the total amount of property tax paid for your home less special assessments. Attach a copy of PAID real estate tax receipt(s). If your home is on more than five acres or you own a mobile home, attach Form 948, Assessor's Certification. 00 9 10. If you rented, enter amount from Form MO-CRP(s), Line 9. Attach rent receipt(s) for the whole year or each month or a REAL ESTA RENT I statement from your landlord, along with Form MO-CRP. Copies of cancelled checks (front and back) will be accepted 00 if your landlord will not provide rent receipts or statement. 10 11. Add Lines 9 and 10. If you rented your home, enter the total or \$750, whichever is less. If you owned your home, enter the total or \$1,100, whichever is less..... 11 00 CREDITS You must use the chart on pages 13-15 to see how much refund you are allowed. Apply amounts from Lines 8 and 11 to chart on pages 13-15 to figure your Property Tax Credit. Note: Renters - maximum allowed is \$750. Owners - maximum amount allowed is \$1,100. . 00 Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which he/she has any knowledge. As provided in Chapter 143, RSMo, a penalty of up to \$500 shall be imposed on any individual who files a frivolous return. I also declare under penalties of perjury that I employ no illegal or unauthorized aliens as defined under federal law and that I am not eligible for any tax exemption, credit or abatement if I employ such aliens I authorize the Director of Revenue or delegate to discuss my claim and attachments | E-MAIL ADDRESS with the preparer or any member of the preparer's firm. YES NO GNATI SIGNATURE DATE PREPARER'S SIGNATURE FEIN, SSN, OR PTIN S SPOUSE'S SIGNATURE DAYTIME TELEPHONE PREPARER'S ADDRESS AND ZIP CODE DATE



2008 FORM • Read instructions. • Print or type. Failure to provide landlord information will

CERTIFICATION OF I	RENT PAID FOR 2006	MO-CH	result in	denial or delay	of your claim.		
SOCIAL SECURITY NUMBER     SPOUSE'S SOCIAL SECURITY NUM		JMBER ARE YOU RELATED TO YOUR LANDLORD? YES NO IF YES, EXPLAIN.					
2. NAME	3. LANDLORD'S NAME, LAST 4 DIGITS OF SSN, OR FEIN (MUST BE COMPLETED)						
ADDRESS OF RENTAL UNIT (DO NOT LIST P.O. BO	LANDLORD'S ADDRESS, CITY, STATE, AND ZIP CODE (MUST BE COMPLETED)						
CITY, STATE, AND ZIP CODE		4. LANDLORD'S PH	ONE NUMBER (MUS	T BE COMPLETED)			
5. RENTAL PERIOD FROM: MONTH DURING YEAR	DAY	YEAR TO 2008	: MONTH	DA		YEAR <b>2008</b>	
Enter your gross rent paid. Attach rent re or copies of cancelled checks (front an	eceipt(s) for each rent payment or the dack). If receiving housing assista	entire year, a stan	tement from you ount of rent YOU	r landlord, J paid 6		00	
☐ F. LOW INCOME HOUSING — 10 ☐ G. SHARED RESIDENCE — If you or children under 18), check the second of the children in the ch	E HOME, OR DUPLEX — 100%  TIAL CARE — 50%	% al household inco r friends (other th ge	an your spouse	%) 7		%	
8. Net rent paid — Multiply Line 6 by the percentage on Line 7.						00	
9. Multiply Line 8 by 20%. Enter amount here and on Line 10 of Form MO-PTC or Line 12 of Form MO-PTS						00	
MO 860-1089 (10-2008)	For Privacy Notice, see pa	ge 16 of the ins	tructions.				

MISSOURI DEPARTMENT OF REVENUE  CERTIFICATION OF RENT PAID FOR 2008		2008 FORM MO-CRP		Read instructions.     Print or type.  Failure to provide landlord information will result in denial or delay of your claim.				
SOCIAL SECURITY NUMBER     SPOUSE'S SOCIAL SECURITY NUMBER		ARE YOU RELATED TO YOUR LANDLORD? YES NO IF YES, EXPLAIN.						
2. NAME		3. LANDLORD'S NAME, LAST 4 DIGITS OF SSN, OR FEIN (MUST BE COMPLETED)						
ADDRESS OF RENTAL UNIT (DO NOT LIST P.O. BOX)	LF	ANDLORD'S ADI	DRESS, (	CITY, STATE, AND ZIP COD	E (MU	ST BE COMPLETED)		
CITY, STATE, AND ZIP CODE	4.	LANDLORD'S I	PHONE N	IUMBER (MUST BE COMPL	ETED)			
5. RENTAL PERIOD FROM: MONTH DURING YEAR		008	TO:	MONTH	D	)AY	YEAR <b>2008</b>	
Enter your gross rent paid. Attach rent receip or copies of cancelled checks (front and batter)					6		00	
	OME, OR DUPLEX — 100%  CARE — 50%  RE NURSING HOME — 45%  — 50%; Otherwise, enter — 100%  (Rent cannot exceed 40% of total f	iends <b>(other</b>	than yo	our spouse	7		· %	
8. Net rent paid — Multiply Line 6 by the percentage on Line 7.					8		00	
9. Multiply Line 8 by 20%. Enter amount here and on Line 10 of Form MO-PTC or Line 12 of Form MO-PTS.					9		00	